

# **Report**

## **Workshop on Child Survival Program with Parbatipur Municipality Cabinet and Concern**

**(Translated from Bangla Report)**

**April 23-25, 2001  
Venue: Rural Development Academy, Bogra**

**Child Survival Program  
Concern**

## **1.0.Introduction and Background:**

Since October 1999, Parbatipur Municipality and Concern have been operating the Child Survival Program to improve the health status of mother and children in Parbatipur municipality area. A 3 –day workshop was organized at Bogra Rural Development Academy from April 23 to April 25, 2001 with the Participation Municipality cabinet, Secretary, Supervisors from health department of Municipality and Thana health complex and also the Concern team includes the Regional Manager of Northern region, CSP Coordinator, Field Trainers and Research Assistant of Parbatipur. Participants discussed vividly the program objectives, activities and implementation strategy and at the end they prepared a 8 months plan (May’01- December,01) for effective implementation of the program. All the participants agreed that the workshop report including the work plan written in Bangla will be signed by Chairman and Concern Regional Manager and be distributed to the participants so that every one can follow the plan and monitor it. They also assure that they would take necessary steps to implement the plan effectively after returning back to Parbatipur.

### **1.1 Objectives of the Workshop:**

- To develop a clear understanding on detail activities of Child Survival Program.
- To prepare a joint work plan (May’01 – December’01) for effective implementation of the program.

## **2.0. Details about workshop:**

Parbatipur municipality Chairman Mr. M.A. Wahab opened the workshop through inviting the participants to achieve the objectives. After the opening session Regional Manager Imran Ansari provide a brief presentation on workshop objectives, program goal, objectives, strategies and outputs.

### **2.1. Goal of CSP:**

To contribute to the reduction of maternal and child mortality and morbidity, and increase child survival through the development of a sustainable Municipality Health Service in Parbatipur.

### **2.2 Program Purpose:**

To strengthen the municipality’s capacity to deliver specific child survival activities of good quality which will improve the health status of mothers and children in Parbatipur, and which can be sustained within existing Municipal and Ministry of Health and Family Welfare(MOHFW) resources.

### **2.3 There are five Program Outputs:**

- A developed Municipality Health Planning and Management System.

- Institutionalized and well managed activities(on selected interventions).
- A sustainable Community Health Promotion System,
- Competent and independent Municipality staff and Supervisors.
- Improved Child Survival Program planning and management.

## 2.4 Program strategies:

Three main strategies are considered important to achieve the outputs:

1. To develop the *management capacity* of municipality Managers and Supervisors via training, facilitation, and participatory planning exercises and meetings.
2. To develop the *technical capacity* of the municipality staff on selected Child Survival activities via training and workshops, on-the-job mentoring, and with the development of a staff support system.
3. To strengthen the municipality's *community approach* through training, facilitation and supporting health committees resulting in a community based health promotion process.

In the next session Dr. Musha, CSP coordinator discussed about the responsibilities of municipality on health and showed the organogram of the municipality. In this session he also discussed specially about the health department organogram and the staff position.

In the next session all the participants were divided in 4 groups to set targets/objectives for health improvement in their respective wards. After setting the targets/objectives they were facilitated to find out the appropriate activities to achieve the targets/objectives. Each group presented their targets/objectives and the activities which was then compiled to make it as the municipality's target and activities. The targets and the activities were then approved by the municipality cabinet. The targets/objectives and the activities are as follows:

### 3.1. Targets/Objectives for municipality health improvement:

By the end of the program period:

- To ensure 100% coverage on EPI
- To vaccinate all the children at right time and a right intervals maintaining the correct procedure.
- To provide TT vaccines to all women of 15 –49 years of age.
- To provide TT vaccine to all pregnant women.
- To ensure 100% coverage of Vitamin A for 0-5 years children.
- To provide Vitamin –A to all suffering from selected diseases and to all post natal mother as prescribed by MOH.
- To aware people on Vitamin A.
- To ensure all deliveries by trained personnel and refer all complicated cases to hospitals.
- To ensure ANC for all pregnant mothers.
- To create awareness on Diarrhea, Pneumonia and Malnutrition so that
  - People can prevent these diseases

-People can be aware when to treat their children by the doctors and to refer to hospital if necessary.

- To create mass awareness on health issues.
- To encourage people to use sanitary latrine.
- To provide treatment in case of any emergency.

### **3.2. Activities to be carried out to achieve the targets/objectives:**

#### **For Awareness Raising**

Awareness raising activities will be carried out involving different stakeholders and structures as follows:

- Through Ward health Committee (WHC)
- Through arranging group meetings by WHC
- By Community Health Volunteers (CHVs)
- By TBAs(specially for women)
- By municipality health staff.
- By Imams
- By Teachers
- By RMP doctors and also MBBS doctors.
- By local clubs
- By NGOs
- By observing health issue days.
- Through folk songs, street drama, mobile cinema show and other medias.
- By Municipality Central Health Committee (MHC)

#### **To ensure health services:**

The following activities were proposed and approved by the participants:

- Proper planning, management and implementation of activities.
- Preparation of annual and monthly plan
- Recruitment of necessary health staff.
- Developing staff skill and knowledge through training.
- Monitoring the progress
- Monthly meeting for health staff
- Regular registration for children and mother.
- Provision of regular vaccination through EPI outreach centers
- Establishment of fixed EPI center at municipality.
- Proper supervision
- Improve coordination among all service providers.
- Arrange training for TBAs, Community Health Volunteers (CHVs), and WHC members.
- Ensure regular salary for the staff.
- Provide Family planning services
- Provide identity cards for TBAs

- Ensure supply of vaccines and Vitamin A
- Ensure proper storage of anti rabies vaccines
- Ensure transportation facilities for the staff.

#### **4. Discussion and Decisions:**

Parbatipur municipality representatives and Concern took the following decisions for effective implementation of the program:

##### **For Awareness raising**

##### **Ward Health Committee:**

- All the ward committees will be formed as per MoLGRD circular through ensuring the participation of representatives from all groups of people in respective ward irrespective of the socio economic back ground including the slum dwellers, sweepers, cobblers and other disadvantaged groups.
- Ward committee meeting will be held monthly and may be held in any emergency situation.
- WHC will take any decision on the consensus of the attended members.
- Municipality Health Committee (MHC) will support WHCs if they are unable to solve any problem.
- Municipality Health staff including the Thana staff will be the member secretary of WHC of his/her own working area.
- Concern FT will be joint secretary of WHCs in his/her working area.
- Entertainment of WHC meeting must be limited in Tk 7 (Seven Taka) per person.
- WHC will arrange group meetings in different parts of the ward as necessary. WHC member of respective area will organize the meeting and other members will provide support.

##### **Community Health Volunteer( CHV):**

- CHVs will support municipality in different activities, observing NIDs and other health issue days and in any emergency situation.
- List of all the trained CHVs will be provided to respective ward Commissioner.
- Each WHC will award certificate to the CHVs of respective ward.
- CHVs will be awarded incentives twice a year based on their performance. Municipality will bear 50% of the cost of the incentives and Concern will bear other 50%. Municipality and Concern jointly decide about the nature of incentives latter.
- WHCs will select 125 CHVs( 13-14 CHV/Ward) more for training by May 15,2001. Female will get especial priority during CHV the selection.
- Concern will arrange all the CHV training.
- Municipality Supervisor (acting) Mr. Mofiz uddin will provide the list of trained CHVs( total 85 so far) to respective ward commissioners by May 3,2001.

### **Traditional Birth Attendants (TBAs):**

- The role of the TBAs will be:
  - a) To ensure normal clean delivery
  - b) To refer the complicated cases to hospital
  - c) To motivate and refer the pregnant women for ANC.
- Municipality Supervisor (acting) Mr. Mofiz uddin will provide the list of trained TBAs (36 trained so far) to the respective Ward Commissioners.
- Municipality Female health staff and female Ward Commissioners will be attending the TBA training and refresher training sessions to acquire basic knowledge.
- Trained TBAs will inform respective Ward Commissioner if some one denies to go to hospital in case of complication after being advised by the TBA. Commissioner will take necessary steps to motivate for referral.
- WHC can select new TBAs for training following the agreed criteria if there is no TBAs trained in that area.

### **Imam:**

- Imams of different mosques will be used to provide health messages during observation of different health issue days. They will provide health messages in Friday Prayer before the 'Khutba'. Before the next round of 9<sup>th</sup> NID municipality will arrange a Imam orientation and Concern will support this effort.

### **Teacher:**

- Municipality health staff including the Thana staff will provide health education in schools and they will inform respective Commissioner earlier so that Commissioner can visit the health education session in the school.
- Municipality health staff will strengthen the school health program and municipality will ensure the Teacher involvement in NIDs as before.
- Orientation sessions will also be arranged for the Primary school Teachers.

### **RMP doctors/Club/NGO:**

- RMP doctors, Clubs, NGOs etc. will be contacted through WHCs and WHCs will motivate them to be involved in health promotion.
- If MoH takes any initiative on IMCI the program will act on accordingly.

### **Observing Health issue days:**

- Municipality will observe Breast Feeding Week, Safe Motherhood Day and Nutrition Week colorfully. Municipality will also observe other days (NID, World health day, AIDs Day, TB day) as selected by the MoH. Municipality will provide Mike and banner and Concern will bear other cost of day observation. If Thana health complex does not observe any health day in weekly or national holidays, municipality will not also observe the day.

- Municipality will ensure the participation of other stakeholders during day observation.

#### **Folk Song:**

- In every ward one folk song session will be arranged to provide health message to the community. The place will be selected by respective WHC. The estimated budget of the folk song is Tk. 1000 for each place. Concern will support municipality through bearing the cost.

#### **To Ensure Service Delivery:**

- Municipality and Thana health staff and supervisors will arrange planning meeting very month in Municipality Health Office and Concern will provide technical support to municipality staff.
- Municipality health staff including the Thana staff will be supplied Birth and Death registration form for collecting information. Staff will submit their forms in monthly meeting.
- Health Convener will supervise health activities in field and will discuss about progress and problems in municipality Cabinet meeting every month.
- Municipality will employ 2 permanent health staff in next fiscal year subject to approval of MoLGRD. Municipality will also employ a Medical Officer this year if MoLGRD permits.
- Municipality Chairman will make all arrangement in consultation with Civil Surgeon and THFPO to retain all the deputed staff in municipality.
- Municipality will take all necessary steps to continue all 32 out reach EPI centers.
- Concern will provide need based training to all the health staff working in municipality including the newly recruited staff. Concern will also organize refresher training for the staff.
- Health activities will be monitored and reviewed in monthly meeting of health department, WHC meeting and in Municipal Cabinet meeting.
- WHC will take necessary measure to ensure proper registration for EPI.
- Municipality Chairman will take all measures to establish a EPI fixed center at Municipality.
- Municipality will ensure the vaccines and vitamin A supply with supply of all necessary logistics for the Fixed Center.
- Supervisors will effectively supervise the activities of health staff and to strengthen the supervision system municipality cabinet will discuss the issue and take decision accordingly in their monthly meeting.
- Municipality Health Committee will be formed to coordinate all the health activities in municipality. Concern will provide support for this committee formation and for the meetings bearing the entertainment cost.
- TBAs will be provided with a identity card jointly signed by municipality and Concern. Concern will bear the cost of the cards. Concern will provide a torch light and a bag to each of the trained TBAs. Concern will provide the batteries once with the torchlight and TBAs will continue to maintain it by themselves.

- Concern will provide the used refrigerator at its office to Municipality to preserve the Anti-rabies vaccines. Concern will handed over the refrigerator by May,2001 after getting the request letter from Municipality.
- It is necessary to conduct a survey to know total and ward wise exact number of male, female, CBA, children etc. It is decided that the next GR (Geographical Reassessment-carried out every year by MOH) will be done properly involving all the Commissioners and others to get the accurate population and other information.
- Municipality will award prize annually to encourage its staff to work better. Municipality cabinet will decide latter about the prize and selection process of staff.
- Municipality staff salary is due for 9 months. Municipality will try to pay the current salary and will also try to pay due salary gradually. Municipality will continue its effort for revenue generation to pay the staff salary more regularly.
- In the mean time to compensate the staff insufficiency Municipality will take measures to hire 2 more staff from Thana health complex.
- Concern and Municipality will jointly decide about the transport support issue for municipality by June 2001.
- Public meeting will be arranged to inform the people about the progress of the current program. Concern and Municipality will share the cost of the meeting.
- If there is any opportunity, necessary arrangement will be taken from the program to provide abroad training to Municipality Chairman and Commissioners.

#### **5. Work Plan ( May 2001- December 2001) – See Annex 1.**

- All the discussion and decisions in the workshop will be furnished in the report and the report will be agreed and signed by Municipality Chairman and Concern Regional Manager and will be preserved to monitor the progress at a regular interval.

Finally participants expressed their opinion evaluating the workshop. Every one in the workshop expressed their opinion on the workshop and described it as a successful one. The workshop was ended through the brief speech of Concern Regional Manager Imran Ansari and Mr. M.A.Wahab, Chairman of Parbatipur municipality.

Signature:  
Chairman  
Parbatipur Municipality

Signature:  
Regional manager  
Concern



## **Work Plan**

## **Annex-1**

**Annex-2****Participants list  
of Bogra Workshop**

<b>Sl No</b>	<b>Name</b>	<b>Designation</b>	<b>Organization</b>
1.	M.A.Wahab	Chairman	Parbatipur Municipality
2.	Karuna Sankar Roy	Secretary	Parbatipur Municipality
3.	Md. Asadul Islam	Commissioner Ward-6	Parbatipur Municipality
4.	Sree Kailash Prashad Sonar	Commissioner Ward-2	Parbatipur Municipality
5.	M.A.Razzak	Commissioner Ward-3	Parbatipur Municipality
6.	Abul Kalam Azad	Commissioner Ward-9	Parbatipur Municipality
7.	Md. Sowkat Hossain	Field Trainer	Concern
8.	Md. Abdus Sattar PK	Assistant Health Inspector	Thana Health Complex
9.	Md. Abu Taher Khan	Family Planning Inspector	Thana Health Complex
10.	Tahmina Haque	Field Trainer	Concern
11.	Imran Ansari	Regional Manager	Concern
12.	Md. Mofiz uddin	Health Assistant –Acting SV	Parbatipur Municipality
13.	Mahbuba Siddiqua Rina	Field Trainer	Concern
14.	Jannatul Baqia	Commissioner Ward-7,8,9	Parbatipur Municipality
15.	TM Mahamudunnabi	Field Trainer	Concern
16.	Md. Zamal Uddin	Research Assistant	Concern
17.	Monjurul Haque	Commissioner Ward-7	Parbatipur Municipality
18.	Maleka Jalal	Commissioner Ward-4,5,6	Parbatipur Municipality
19.	Md. Khatibor Rahman	Commissioner Ward-4	Parbatipur Municipality
20.	Reshma Zaman	Commissioner Ward-1,2,3	Parbatipur Municipality
21.	Md. Abul Kalam	Commissioner Ward-8	Parbatipur Municipality
22.	Dr. A.K.M.Musha	CSP Coordinator	Concern

**Group wise distribution of Participants**

<b>Group No.</b>	<b>Name of Participants</b>				
01	Kailah Prasad Sonar	Reshma Zaman	M.A.Razzak	Abu Taher Khan	Mahbuba Siddiqua
02	Abdus Sattar	Khatibor Rahman	Tahmina Haque	Maleka Jala	-----
03	Asadul Islam	Abul Kalam	Zannatul Baqia	Karuna Sankar	TM Mahamudunnabi
04	Mofiz Uddin	Shawkot Hossain	Abul Kalam Azad	Monjurul Haque	-----

## Annex-3

### Workshop with Parbatipur Municipality Cabinet

Date: April 23 to April 25, 2001

Venue: Rural Development Academy, Bogra

Participants: Municipality Cabinet including the secretary and health Supervisors with Concern FT, RA , Research Officer, CSP Coordinator, Regional Manager.

### Schedule

Session	Time	Topics/Activities	Facilitator/s
	<b>DAY -1</b>		
1.	8.30am-8.45am	Registration	Jamal Uddin
2.	8.45am-9.30am	Introduction, Ice breaking	Musha
3.	9.30am-10.00am	Objectives, Opening	ImranAnsari/ M.A.Wahab
	<b>10am-10.30am</b>	<b>Tea Break</b>	
4.	10.30am-11.30am	Municipality services- responsibility & structure.	A.K.M.Musha
5.	11.30am-12.30 pm	Group work for setting objectives/target for health improvement in municipality	A.K.M.Musha
6.	12.30pm-1.00pm	Group presentation and discussion	A.K.M.Musha
	<b>1.00pm-2.00pm</b>	<b>Lunch Break</b>	
7.	2.00am- 3.30 pm	Group work to identify priority activities for health improvement in municipality	A.K.M.Musha
		<b>Tea break</b>	
8.	3.30pm-4.30pm	Group presentation	A.K.M.Musha
	<b>DAY- 2</b>		
9.	8.30am –9.30 am	Review previous day's activities	Tahmina Haque
10.	9.30am-10.30am	Detail discussion on proposed activities- Community Health Promotion	A.K.M.Musha
	<b>10.30am-11.00am</b>	<b>Tea Break</b>	
11.	11am-1pm	Detail discussion on proposed activities- Community Health Promotion	A.K.M.Musha
	<b>1pm –2pm</b>	<b>Lunch Break</b>	
12.	2pm-3.30pm	Detail discussion on proposed activities- Service delivery and Management, coordination with other service providers.	A.K.M.Musha
	<b>3.30pm-4.00pm</b>	<b>Tea Break</b>	
13.	4.00pm-4.30	Detail discussion on proposed activities- Service delivery and Management, Coordination with other service providers.	A.K.M.Musha
	<b>DAY-3</b>		
14.	8.30am-9.30am	Review previous learning	Shawkot Hossin
15.	9.30am-11am	Constraints and action for effective implementation of program	A.K.M.Musha
	<b>11am-11.30am</b>	<b>Tea Break</b>	
16.	11.30am – 1.00pm	Plan for implementation of priority activity	A.K.M.Musha
	<b>1pm-2pm</b>	<b>Lunch break</b>	
17.	2pm-3.30pm	Plan for implementation of priority activity	A.K.M.Musha

	<b>3.30pm –4.00pm</b>	<b>Tea break</b>	
18.	4.00pm-4.30	Closing	Imran Ansaari / M.A.Wahab

## **Annex-4**

### **Session Plan of Workshop**